

An Overview



The Centers for Disease Control and Prevention (CDC) estimates that more than 46 million American adults have doctor-diagnosed arthritis, with this number expected to grow as the population ages. Arthritis is the leading cause of disability in the country, and managing it can be complex and frustrating for both patients and health-care providers.

Current clinical practice guidelines for arthritis emphasize the use of non-pharmacological treatments such as self-management education and physical activity interventions. The CDC Arthritis Program and the state health department support these interventions as an

effective way for your patients to reduce the pain and disability of arthritis and to gain confidence in managing their condition. Many of these interventions are also helpful for people with other chronic health conditions.

The CDC Arthritis Program has identified a number of evidence-based, low-cost interventions that have been proven effective for reducing symptoms and improving the quality of life of people with arthritis. Several of these programs are being offered in your community. Add them to your toolbox of management strategies for arthritis and other chronic diseases. Encourage your patients to sign up for a program that suits their needs.

You play a key role in encouraging your patients with arthritis to take advantage of these interventions. For example, according to analyses conducted by CDC, people are more than 18 times as likely to participate in an arthritis self-management education intervention if their healthcare provider recommends it. By recommending a self-management education or physical activity intervention, you will be giving your patients the tools they need to help improve their symptoms and improve their quality of life.

More About the Interventions

- The self-management education and physical activity interventions supported by the CDC Arthritis Program were designed by reputable organizations such as Stanford University, the University of Washington, and the Arthritis Foundation.
- **Self-management education** workshops offer instruction on day-to-day strategies for managing and coping with arthritis and other chronic health conditions. Workshops are offered in English and Spanish and cover topics such as:
 - Techniques to deal with pain, fatigue, and physical limitations
 - Appropriate exercise and medication use
 - Effective communication with family, friends, and physicians
 - Proper nutrition

- **Physical activity** interventions teach a range of exercises—from balancing and stretching techniques, to endurance and strength training, to low-impact aerobics. They can be modified for different skill and disability levels. The exercises are designed to improve flexibility, joint range of motion, balance, endurance, and strength. In many physical activity programs, participants also learn behavioral skills such as goal-setting, problem-solving, and overcoming barriers.
- Taught by trained and certified instructors, these low-cost interventions are offered at convenient locations throughout the community. Self-management education courses typically cost about \$25 and require about a 2–2½ hour time commitment per week over 6–8 weeks. The fee for physical activity programs ranges from \$1–\$4 per session, with classes meeting one to three times per week for 8–12 weeks or on an ongoing basis.

Benefits to Patients

- Evidence from clinical trials and program evaluations demonstrates that people with arthritis do benefit from self-management education and physical activity interventions. Participation in these programs can reduce symptoms, improve well-being, and boost self-confidence. Studies have found that the effects of some interventions last well after the last class.
- The interventions supported by the CDC Arthritis Program have been shown to offer a number of physical, behavioral, and psychosocial benefits, such as:
 - Reduced pain and fatigue
 - Improved quality of life
 - Improved range of motion
 - Increased physical activity
 - Elevated mood
 - Increased confidence in the ability to manage arthritis
 - Improved psychosocial functioning
- Both self-management education and physical activity interventions have the added benefit of encouraging participants to increase the amount of exercise they get. This can help them maintain a healthy weight, which is important in controlling disease progression and disability.
- Improvements in symptoms and quality of life may translate to more satisfied patients.



For More Information

- Brady TJ, Jernick SL, Hootman JM, et al. Public health interventions for arthritis: expanding the toolbox of evidence-based interventions. *Journal of Women's Health*. 2009;18(12):1905–1917.
- *Quick stats on arthritis*: www.cdc.gov/arthritis/media/quickstats.htm
- *Descriptions of specific interventions*: www.cdc.gov/arthritis/interventions.htm
- *CDC publications by topic*: www.cdc.gov/arthritis/publicatons/topics.htm

What's Available in Our Community

- Originally developed by Stanford University researcher Dr. Kate Lorig, the **Arthritis Foundation Self-Help Program (AFSHP)** is designed to help people with arthritis adapt to their condition and gain confidence and control over their lives. AFSHP is an interactive workshop series in which participants learn techniques—such as effective problem-solving and communication—for building an individualized arthritis self-management program that addresses their physical and psychological needs. Workshops include educational sessions and group discussions, and participants are encouraged to practice the techniques they learn on their own.
- Developed at Stanford University, the **Chronic Disease Self-Management Program**, known as **Better Choices, Better Health** in our state, is a self-management education intervention that aims to build participants' confidence in managing their health and to keep them active and engaged in their lives. People with arthritis and other chronic health conditions participate in the program together, and those with comorbidities may find it especially helpful. In a series of interactive workshops, participants learn techniques—such as problem-solving, decision-making, and goal-setting—for managing problems common to people with chronic diseases to help reduce symptoms and disability. Participants discuss their progress as a group and give each other feedback.

Program Contact Information

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South Carolina Department of Health
and Environmental Control

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Class Schedules and Locations

Capital Senior Center
1650 Park Circle
Columbia, SC

Drew Wellness Center
2101 Walker Solomon Way
Columbia, SC

Better Choices, Better Health
Chronic Disease Self-Management Program

Jan 25 - March 1, 2011
Tuesdays, 1:00 pm - 3:30 pm

March 3 - April 7, 2011
Thursdays, 10:00 am - 12:30 pm

April 20 - May 25, 2011
Wednesdays, 10:00 am - 12:30 pm

Arthritis Foundation Self-Help Program

February 16 - March 23, 2011
Wednesdays, 1:00 pm - 3:00 pm

March 21 - April 25, 2011
Mondays, 2:00 pm - 4:00 pm

May 11 - June 15, 2011
Wednesdays, 1:00 pm - 3:00 pm

Arthritis Foundation Self-Help Program

July 25 - August 29, 2011
Mondays, 1:00 pm - 3:00 pm

Better Choices, Better Health
Chronic Disease Self-Management Program

March 9 - April 13, 2011
Wednesdays, 1:00 pm - 3:30 pm

For More Information:
S. C. DHEC
Arthritis Prevention and Control Program
(803) 898-0760
<http://www.scdhec.gov/arthritis>

References

Arthritis Foundation Self-Help Program

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Buszewicz M, Rait G, Griffin M, et al. Self management of arthritis in primary care: randomised controlled trial. *BMJ*. 2006;333(7574):879. Free full text article available at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1626290/pdf/bmj33300879.pdf>.

Goeppinger J, Armstrong B, Schwartz T, et al. Self-management education for persons with arthritis: managing comorbidity and eliminating health disparities. *Arthritis and Rheumatism*. 2007;57(6):1081–1088. PMID: 17665471. Free full text article available at <http://www3.interscience.wiley.com/cgi-bin/fulltext/114297542/PDFSTART>.

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Lorig K, Mazonson P, Holman HR. Evidence suggesting that health education for self-management in patients with chronic arthritis has sustained health benefits while reducing health care costs. *Arthritis and Rheumatism*. 1993;36(4):439–446.

Lorig K, Ritter PL, Plant K. A disease-specific self-help program compared with a generalized chronic disease self-help program for arthritis patients. *Arthritis and Rheumatism*. 2005;53(6):950–957. Free full text article available at <http://www3.interscience.wiley.com/cgi-bin/fulltext/112193125/PDFSTART>.

Osborne RH, Wilson T, Lorig KR, et al. Does self-management lead to sustainable health benefits in people with arthritis? A 2-year transition study of 452 Australians. *The Journal of Rheumatology*. 2007;34(5):1112–1117.

Chronic Disease Self-Management Program (Living Well South Carolina)

Barlow JH, Wright CC, Turner AP, et al. A 12 month follow-up study of self-management training for people with chronic disease: are changes maintained over time? *British Journal of Health Psychology*. 2005;10:589–599.

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Kennedy A, Reeves D, Power P, et al. The effectiveness and cost effectiveness of a national lay-led self-care support programme for patients with long-term conditions: a pragmatic randomized controlled trial. *Journal of Epidemiology and Community Health*. 2007;61(3):254–261. Free full text article available at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2652924/pdf/254.pdf>.

Lorig KR, Ritter P, Stewart AL, et al. Chronic Disease Self-Management Program: 2-year health status and health care utilization outcomes. *Medical Care*. 2001;39(11):1217–1223.

Lorig KR, Sobel DS, Stewart AL, et al. Evidence suggesting that a chronic disease self-management program can improve health status while reducing utilization and costs: a randomized trial. *Medical Care*. 1999;37(1):5–14.